

JENNIFER M. GRANHOLM GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS LANSING

PATRICIA L. CARUSO DIRECTOR

OFFICE OF THE PAROLE BOARD

Attached is the <u>Application for Pardon After Parole or Discharge</u> you requested. If you choose to apply for a pardon, you should complete this Application and submit **one** (1) **copy of it and all supporting documentation** to the Parole Board.

As required by Michigan law, upon review of the Application packet, the Parole Board will determine if the Application has AMerit@ and take one of the following actions:

- 1. If the Parole Board determines that the Application has merit, the local parole office will conduct a pardon investigation. If, after review of the pardon investigation, the Parole Board still determines that the Application has merit, the Judge and Prosecutor in the sentencing county will be asked for their position on the pardon. If neither objects to the pardon, a Public Hearing will be held in Lansing. After the Public Hearing, the Parole Board will send the Application, a transcript of the Public Hearing and its determination of merit or no merit to the Governors Office for a final decision.
- 2. If the Parole Board determines that the Application **does not have merit**, a pardon investigation will **not** be requested. Instead, the Application with the determination of ANo Merit@will be sent directly to the Governor=s Office for a final decision.

The Governor-s Office will notify the pardon applicant once a final decision has been made.

Sincerely,

MICHIGAN PAROLE BOARD

Pardons and Commutations Coordinator Attachments

MICHIGAN DEPARTMENT OF CORRECTIONS OFFICE OF THE PAROLE BOARD

APPLICATION FOR PARDON AFTER PAROLE OR DISCHARGE

I hereby petition, as provided by law, for a pardon for the following conviction(s) in the State of Michigan and submit the following information in support of this petition:

	Place of	Naı	ne Used	Charge		Sentence
	ive you been arre Yes@, provide fo			, ,	which you are	requesting pardon?
1.						
3.						
2.						
1.						
	Citle and Type anor or Felony)	Date	Court and I	Location	Judge	Sentence and Completion Date
Mi	chigan conviction	n(s) for which	ch you are reque	esting a pardor	:	
						igan Prison #
	his section used for the of Birth:				•	.S. Citizen: Yes No_
Те	lephone Number	(_)			
Ci	ty, State, Zip Coo	le				
Stı	me: reet Address:					

3.							
5.	List all em	ployment you ha	ve had during th	e last twenty	years:		
Е	mployer	Address Number	and Phone	Start Date	End Date	Reason for I	Leaving
1							
2							
3							
4	•						
5	•						
6	•						
Nota	 ary:	y of					 personally
appea or sho own	ared before n e had read th	ne, known to me to e foregoing applic except those matte	to be the person cation by him/he	who signed er subscribed	the forego	oing petition, and the contents	and who made an oath that he thereof to be true of his/her as to those matters he/she
				Notary	Public		
				County		State	
				My Co	mmission	Expires on	
INST	RUCTIONS:						
1. 2. 3.	have the sig Complete a		ant (or the person	applying for ditional sheets	the applica	nt) and the Nota	oth copies of the Application mu arys stamp and signature.
	Michigan Department of Corrections						

Office of the Parole Board Pardons and Commutations Coordinator Post Office Box 30003 Lansing, Michigan 48909

CRX-174 (6/97)



JENNIFER M. GRANHOLM GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS LANSING

PATRICIA L. CARUSO DIRECTOR

OFFICE OF THE PAROLE BOARD

Attached is the <u>Application for Pardon or Commutation -- Current Michigan Prisoner</u> you requested. If you choose to apply for a pardon or commutation, you should complete this Application <u>and submit one copy</u> of it and all supporting documentation to the Parole Board.

As required by Michigan law, upon review of the Application packet, the Parole Board will determine if the Application has "Merit" and take one of the following actions:

- 1. If the Parole Board determines that the Application **has merit**, the Judge and Prosecutor in the sentencing county will be asked for their position on the Application. If neither objects to the Application, a Public Hearing on the Application will be held. After the Public Hearing, the Parole Board will send the Application, a transcript of the Public Hearing and its determination of merit to the Governors Office for a final decision.
- 2. If the Parole Board determines that the Application **does not have merit**, the Application with the determination of ANo Merit@ will be sent directly to the Governors Office for a final decision.

According to Administrative Rule 791.7760(2), the Parole Board can accept an application only one time every two years. The Governors Office will notify the applicant once a final decision has been made.

Sincerely,

MICHIGAN PAROLE BOARD

Pardons and Commutations Coordinator Attachments

MICHIGAN DEPARTMENT OF CORRECTIONS OFFICE OF THE PAROLE BOARD

APPLICATION FOR PARDON OR COMMUTATION OF SENTENCE

I hereby petition, as provided by law, for a pardon or commutation of sentence for the following conviction(s) in the State of Michigan and submit the following information in support of this petition:

1. Name:		Number:		Location:	Location:
Date of Bi	th:	U.S. Citizen?	Yes	No	
2. Michigan c	onviction(s) for which	h you are requesting a pardon o	or commutati	on of sentence:	
Crime Title and (Misdemeanor or F		Court and Location	Judge	Sentence	
1.					
2.					
3.					
4.					
		ning why are you requesting a p			

5.	Provide a brief statement explaining why you should	uld be granted a pardon or commutation:
6.	What are your home and job placement plans in the	the event you are released?
Note:	: If this Application is not signed by the applicant per	personally, it is signed by
	for the following	wing reason:
	(Relationship)	
Submi	mitted by:	Data
Suom	(Signature)	Date:
Nota	ary:	
On thi	his day of, the petit	norsonally norsonally
		etitioner, personally signed the foregoing petition, and who made an oath that he or
		ibed and knew the contents thereof to be true of his/her own
be true		nformation or belief, and as to those matters he/she believes to
	Not	Notary Public
		County State
	My	My Commission Expires on
INSTR	RUCTIONS:	

Submit the original and one copy of the Application and all supporting documentation. Both copies of the Application must

have the signature of the applicant (or the person applying for the applicant) and the Notary-s stamp and signature.

1.

- 2. Complete all items and questions fully, using additional sheets as necessary.
- 3. Mail the Application and supporting documentation to:

Michigan Department of Corrections Office of the Parole Board Pardons and Commutations Coordinator Post Office Box 30003 Lansing, Michigan 48909

CRX-175 (6/97)